FORM D



UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

| OMB APPROVAL | | | | | |
|--------------------------|-----------|--|--|--|--|
| OMB Number: | 3235-0076 | | | | |
| Expires: | | | | | |
| Estimated average burden | | | | | |
| hours per respons | 16.00 | | | | |

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| SEC USE ONLY | | | | | |
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| Prefix | Serial | | | | |
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| DATE RECEIVED | | | | | |
| 1 | | | | | |

| UNIFORM LIMITED OFFERING EXEM | PIION |
|--|--|
| Name of Offering (check if this is an amendment and name has changed, and indicate change.) | |
| Shares | |
| Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment | ULOE RECEIVED |
| A. BASIC IDENTIFICATION DATA | TO THE PARTY OF TH |
| 1. Enter the information requested about the issuer | AUG II II G |
| Name of Issuer (check if this is an amendment and name has changed, and indicate change.) 67 Holly Hill Lane Associates, LLC | 1 0 2005 |
| Address of Executive Offices (Number and Street, City, State, Zip Code) | Telephone Namber (Hall)eing Area Code) |
| 12 Charles Street, Greenwich, CT 06830 | (203) 863-9555 |
| Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) | Telephone Number (Including Area Code) |
| Brief Description of Business | PROCECCI |
| Real estate investment | 1.0000 |
| | AUG 1 2 200 |
| Type of Business Organization corporation limited partnership, already formed other (1) | please specify): |
| business trust limited partnership, to be formed | PROCESSI AUG 1 2 200 Please specify): THOMSON FINANCIAL |
| Actual or Estimated Date of Incorporation or Organization: 0 6 0 5 / Actual Estimated Date of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction) | mated e: 【【】】 |
| GENERAL INSTRUCTIONS | |
| Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D 77d(6). | or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. |
| When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given b which it is due, on the date it was mailed by United States registered or certified mail to that address. | |
| Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20 | 9549. |
| Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manual photocopies of the manually signed copy or bear typed or printed signatures. | ly signed. Any copies not manually signed must be |
| Information Required: A new filing must contain all information requested. Amendments need only report thereto, the information requested in Part C, and any material changes from the information previously support be filed with the SEC. | |
| Filing Fee: There is no federal filing fee. | |
| State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the sare to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for accompany this form. This notice shall be filed in the appropriate states in accordance with state law, this notice and must be completed. | Securities Administrator in each state where sales or the exemption, a fee in the proper amount shall |
| ATTENTION ——— | |
| Failure to file notice in the appropriate states will not result in a loss of the federal e | xemption. Conversely, failure to file the |

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the

SEC 1972 (6-02)

filing of a federal notice.

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A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter ■ Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Greenwich Properties, Inc. Business or Residence Address (Number and Street, City, State, Zip Code) 12 Charles Street, Greenwich, CT 06830 Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Greenwich Investments, Inc. Business or Residence Address (Number and Street, City, State, Zip Code) 12 Charles Street, Greenwich, CT 06830 Promoter Check Box(es) that Apply: Director General and/or Managing Partner Full Name (Last name first, if individual) William W. Johnson Business or Residence Address (Number and Street, City, State, Zip Code) 551 North Street, Greenwich, CT 06830 Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

| | | | | | В. П | NFORMAT | ON ABOU | T OFFERI | NG | | | | |
|---|--|----------------------|----------------|----------------------|----------------------|----------------------|------------------------------|---------------------------------------|---|----------------------|----------------------|----------------------|---|
| 1. | Has the | issuer sold | l or does th | ne issuer ir | itend to se | l to non-a | ccredited in | nvestors in | this offeri | ng? | | Yes | No IX |
| •• | 1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? | | | | | | •••••• | Baraji Baraji | <u></u> | | | | |
| 2. | | | | | | | | | _{\$_} 50, | 000.00 | | | |
| _ | | | | | | | | | | | | Yes | No |
| 3. | | | permit joint | | | | | | | | | | |
| 4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, an commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a stat or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of suc a broker or dealer, you may set forth the information for that broker or dealer only. | | | | | | | he offering. with a state | | | | | | |
| | ll Name (l t applicat | | first, if indi | ividual) | | | | · | | | | | |
| _ | | | Address (N | umber and | Street, Ci | ty, State, Z | ip Code) | | | | | | *************************************** |
| | | | | | | | | | | | | | |
| Na | me of Ass | sociated Br | oker or De | aler | | | | | | | | | |
| Sta | tes in Wh | ich Person | Listed Has | Solicited | or Intends | to Solicit | Purchasers | | | | | | |
| | (Check | "All States | s" or check | individual | States) | •••••• | | | • | ••••• | •••••• | ☐ All | States |
| | AL IL MT RI | AK IN NE SC | IA NV SD | AR KS NH TN | CA KY NJ TX | LA NM UT | ME NY VT | DE MD NC VA | DC MA ND WA | FL MI OH WV | GA MN OK WI | HI MS OR WY | MO PA PR |
| Ful | ll Name (l | Last name | first, if indi | ividual) | | | | | | | | | |
| Bu | siness or | Residence | Address (N | Number an | d Street, C | ity, State, 2 | Zip Code) | | | | | | |
| Na | me of Ass | sociated Br | oker or Dea | aler | | | | | | | | | |
| Sta | ites in Wh | ich Person | Listed Has | Solicited | or Intends | to Solicit | Purchasers | | | | | | |
| | (Check | "All States | s" or check | individual | States) | ••••• | ••••• | ••••• | ••••• | •••••••• | ••••• | ☐ Al | States |
| | AL IL MT | AK IN NE SC | IA NV SD | AR KS NH TN | CA KY NJ TX | CO LA NM UT | CT ME NY VT | DE MD NC VA | DC MA ND WA | FL MI OH WV | GA MN OK WI | HI MS OR WY | MO PA PR |
| Ful | ll Name (| Last name | first, if indi | ividual) | | | | | | | | | |
| Bu | siness or | Residence | : Address (N | Number an | d Street, C | ity, State, Z | Zip Code) | · · · · · · · · · · · · · · · · · · · | | | | | |
| Name of Associated Broker or Dealer | | | | | | | | | | | | | |
| Name of Associated bloker of Dealer | | | | | | | | | | | | | |
| States in Which Person Listed Has Solicited or Intends to Solicit Purchasers | | | | | | | | | | | | | |
| | (Check | "All States | s" or check | individual | States) | ••••• | **************** | | ······ | ••••••••• | •••••• | ☐ A1 | l States |
| | AL IL MT | AK IN NE SC | IA NV SD | AR KS NH TN | CA KY NJ TX | CO LA NM UT | ME NY VT | DE MD NC VA | DC MA ND WA | FL MI OH WV | GA MN OK WI | HI MS OR WY | ID MO PA PR |

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

| 1. | sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\) and indicate in the columns below the amounts of the securities offered for exchange and | | |
|----|---|-----------------------------|----------------------------|
| | Type of Security | Aggregate Offering Price | Amount Already Sold |
| | | - | |
| | Debt | | |
| | Equity | \$ | \$ |
| | Common Preferred | _ | _ |
| | Convertible Securities (including warrants) | | |
| | Partnership Interests | | \$ |
| | Other (Specify Shares) | | |
| | Total | \$ 3,000,000.00 | § 2,128,480.00 |
| | Answer also in Appendix, Column 3, if filing under ULOE. | | |
| 2. | Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." | ; | Aggregate |
| | | Number Investors | Dollar Amount of Purchases |
| | Accredited Investors | 6 | \$_2,128,480.00 |
| | Non-accredited Investors | 0 | <u>\$_0.00</u> |
| | Total (for filings under Rule 504 only) | | \$ |
| | Answer also in Appendix, Column 4, if filing under ULOE. | | |
| 3. | If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. | | |
| | Type of Offering | Type of Security | Dollar Amount Sold |
| | Rule 505 | n/a | \$ |
| | Regulation A | n/a | \$ |
| | Rule 504 | n/a | \$ |
| | Total | | <u>\$_0.00</u> |
| 4 | a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. | • | |
| | Transfer Agent's Fees | | \$ |
| | Printing and Engraving Costs | | \$ |
| | Legal Fees | Z | \$_22,000.00 |
| | Accounting Fees | | \$ |
| | Engineering Fees | | \$ |
| | Sales Commissions (specify finders' fees separately) | _ | \$ |
| | Other Expenses (identify) | | \$ |
| | Total | _ | § 22,000.00 |

| | b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer." | | \$2,978,000.00 |
|-----|--|--|-----------------------|
| 5. | Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above. | | |
| | | Payments to Officers, Directors, & Affiliates | Payments to Others |
| | Salaries and fees | | |
| | Purchase of real estate | | 2 ,978,000.00 |
| | Purchase, rental or leasing and installation of machinery and equipment | \$ | <u> </u> |
| | Construction or leasing of plant buildings and facilities | | \$ |
| | Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger) | ¬\$ | |
| | Repayment of indebtedness | | |
| | Working capital | \$ | \$ |
| | Other (specify): | \$ | \$ |
| | | \$ | <u></u> \$ |
| | Column Totals | \$_0.00 | \$2,978,000.00 |
| | Total Payments Listed (column totals added) | <u>2,978,000.00</u> | |
| | D. FEDERAL SIGNATURE | | |
| sig | e issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice nature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commis information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of F | sion, upon writte | |
| Iss | uer (Print or Type) signature 1 | Date | |
| 67 | Holly Hill Lane Associates, LLC | 8/ <i>5</i> /05 | |
| Na | me of Signer (Print or Type) Title of Signer (Print or Type) | | |
| Jos | eph A. Pecora President of Greenwich Properties, Inc., Mana | ager of the Issue | r |

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)